



## OFFICIAL COMMUNICATION

5775 Morehouse Drive  
San Diego, CA 92121  
Fax: (858) 658-2502

**Facsimile Transmittal**

DATE: March <sup>18</sup> 2005  
TO: Amendment  
Commissioner for Patents  
ATTN: Examiner: Carlos S.W. Tsai  
Art Unit: 2857

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FAX NUMBER: (703) 872-9306

FROM: Thomas M. Thibault, Attorney for Applicant  
Registration No. 42,181

Total Number of Pages Sent: ~~13~~ 14 (including this transmittal cover sheet)

\*\*\*\*\*  
FILING BY FACSIMILE:

ATTORNEY DOCKET NO.: 020026

## ENCLOSED ARE:

- Amendment ( 11 pages)
- Transmittal (no duplicate)

APPLICANT: Patrick et al

ASSIGNEE: QUALCOMM Incorporated

SERIAL NO.: 10/687,478

FILED: October 16, 2003

FOR: Procedure for Estimating a Parameter of a Local Maxima or Minima of a Function

\*\*\*\*\*  
Please contact Theresa at (858) 651-0159 if all pages do not transmit.

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U.S. Department of Commerce  
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PATENT

## AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Customer No.: 23696  
Attorney Docket No.: 020026  
In Re Application of: Patrick et al.  
Serial Number: 10/687,478  
Filed: October 16, 2003  
Examiner: Carlos S.W. Tsai  
Group Art Unit: 2857

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	31	55	0	x \$50 =	\$ 0
Independent**	2	4	0	x \$200 =	\$ 0
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No				\$360	\$
EXTENSION FEES				<input type="checkbox"/> One Month	\$120
				<input checked="" type="checkbox"/> Two Months	\$450
				<input type="checkbox"/> Three Months	\$1020
TERMINAL DISCLAIMER				\$130	\$
				TOTAL FEE	\$ 450 <sup>00</sup>

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$\_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$450<sup>00</sup>.  
The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 3-18-05

Signature:

Thomas M. Thibault, Reg. No. 42,181  
Phone No. (858) 651-2356

QUALCOMM Incorporated  
Attn: Patent Department  
5775 Morehouse Drive  
San Diego, California 92121-1714  
Telephone: (858) 658-5787  
Facsimile: (858) 658-2502

## CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

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Depositor's Name: Thomas M. Thibault

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## PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of	)	
PATRICK ET AL.	)	For: <b>PROCEDURE FOR ESTIMATING</b>
Serial No.: 10/687,478	)	<b>A PARAMETER OF A LOCAL</b>
	)	<b>MAXIMA OR MINIMA OF A</b>
	)	<b>FUNCTION</b>
Filed: October 16, 2003	)	Group Art Unit: 2857

**RESPONSE TO OFFICE ACTION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Attention: Carol S. Tsai  
Patent Examiner

Dear Ms. Tsai:

The following response is being submitted in response to an Office Action dated October 18, 2004. Please consider the follow remarks, beginning on page 8:

\_\_\_\_\_